

FINGERPRINTS

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Sekaran
Middle Name::
Family Name:: Nanja
City of Residence:: San Jose
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 5824 Chambertin Drive
City of Mailing Address:: San Jose
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 95118

Applicant Authority Type:: Inventor
Primary Citizenship Country:: India
Status:: Full Capacity
Given Name:: Shan
Middle Name::
Family Name:: Balasubramaniam
City of Residence:: Mountain View
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1929 Crisanto Avenue, #204
City of Mailing Address:: Mountain View
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94040

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number::

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	09/861,483	05/17/01

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

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